



Attorney Docket No. 944-005.018

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application Of:

Petri Kokko, Markku Autio

Confirmation No. **3532**

Application Serial No.: **10/686,509**

:

Group/Art Unit: **2643**

Filing Date: **October 14, 2003**

:

Examiner: **Sujatha Sharma**

Title: **Method and Apparatus for Locking a Mobile Telephone Touch Screen**


Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT IN RESPONSE TO OFFICIAL ACTION

Sir:

In response to the non-final Official Action of September 20, 2006, please amend the above-captioned patent application as follows:

I hereby certify that this communication is being deposited with the United States Postal Service today, **December 19, 2006**, in an envelope with sufficient postage as first-class mail addressed to the Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450.



Kelly Puglio

DFW

Practitioner's Docket No. 944-005.018

PATENT



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In application of: **Petri Kokko et al.**

Application No.: **10/686,509**

Group No.: **2643**

Filed: **October 14, 2003**

Examiner: **Sujatha Sharma**

For: **Method and Apparatus for Locking a Mobile Telephone Touch Screen**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is

☐ a small entity. A statement:

☐ is attached.

☐ was already filed.

☒ other than a small entity.

CERTIFICATE OF MAILING/TRANSMISSION UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

☒ deposited with the United States Postal Service with sufficient postage as first-class mail, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

FACSIMILE

☐ transmitted by facsimile to the U.S. Patent and Trademark Office.

Date: 12/19/2006

Kelly A. Puglio
Signature

Kelly A. Puglio
(type or print name of person certifying)

EXTENSION OF TERM

NOTE: "Extension of Time in Patent Cases (Supplement Amendments) - If a timely and complete response has been filed after a Non-Final Office Action, an extension of time is not required to permit filing and/or entry of an additional amendment after expiration of the shortened statutory period.

If a timely response has been filed after a Final Office Action, an extension of time is required to permit filing and/or entry of a Notice of Appeal or filing and/or entry of an additional amendment after expiration of the shortened statutory period unless the timely-filed response placed the application in condition for allowance. Of course, if a Notice of Appeal has been filed within the shortened statutory period, the period has ceased to run." Notice of December 10, 1985 (1061 O.G. 34-35).

NOTE: See 37 C.F.R. §1.645 for extensions of time in interference proceedings, and 37 C.F.R. §1.550(c) for extensions of time in reexamination proceedings.

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. §1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☐ Applicant petitions for an extension of time under 37 C.F.R. §1.136 (fees: 37 C.F.R. §1.17(a)(1)-(4)) for the total number of months checked below:

<u>Extension (months)</u>	<u>Fee for other than small entity</u>	<u>Fee for small entity</u>
<input type="checkbox"/> one month	\$ 120.00	\$ 60.00
<input type="checkbox"/> two months	\$ 450.00	\$225.00
<input type="checkbox"/> three months	\$1,020.00	\$510.00
<input type="checkbox"/> four months	\$1,590.00	\$795.00

Fee: \$ _____

If an additional extension of time is required, please consider this a petition therefor.

(check and complete the next item, if applicable)

- ☐ An extension for _____ months has already been secured. The fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. §1.16(b)-(d)) has been calculated as shown below:

(Col. 1)		(Col. 2)			(Col. 3)		SMALL ENTITY			OTHER THAN A SMALL ENTITY		
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR			PRESENT EXTRA		ADDIT. RATE	FEE	OR	ADDIT. RATE	FEE	
TOTAL:	10	MINUS	20	=	0		x \$ 25 =	\$		x \$ 50 =	\$ 0	
INDEP:	2	MINUS	3	=	0		x \$100 =	\$		x \$200 =	\$ 0	
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM							+ \$180 =		\$	+ \$360 = \$ 0		
							TOTAL ADDL. FEE		\$	TOTAL ADDL. FEE		\$ 0

WARNING: "After final rejection or action (§1.113) amendments may be made cancelling claims or complying with any requirement of form which has been made." 37 C.F.R. §1.116(a) (emphasis added).

(complete (c) or (d), as applicable)

(c) ☒ No additional fee for claims is required.

OR

(d) ☐ Total additional fee for claims required is \$_____.

FEE PAYMENT

5. ☐ Attached is a check in the sum of \$_____.

☐ Charge Account No. _____ the sum of \$_____. A duplicate of this transmittal is attached.

FEE DEFICIENCY

NOTE: If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986 (1065 O.G. 31-33).

6. ☒ If any additional extension and/or fee is required, charge Account No. 23-0442.

AND/OR

- ☒ If any additional fee for claims is required, charge Account No. 23-0442.



Signature of Practitioner

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